

**Bureau of Land Management**  
**Fitness Membership Fee Reimbursement Program**  
**Self-Certification of Usage**

I certify that I have engaged in fitness activities at the center in which I am seeking membership fee reimbursement on an average of two times per week for at least ½ hour per visit for the period for which I am seeking reimbursement.

I understand that my failure to engage in fitness activities at my center at least two times per week for at least ½ hour per visit for the reimbursement period disqualifies me from receiving reimbursement for my membership fees.

I also understand that falsely certifying usage will lead to my immediate removal from participation in the BLM's Fitness Membership Fee Reimbursement Program, without reimbursement for any expenses already incurred, and could result in appropriate disciplinary action.

Print Name: \_\_\_\_\_

Fitness Center: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_